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CONFIRMATION NO. 4771

<b>SERIAL NUMBER</b> 10/622,834	<b>FILING OR 371(c) DATE</b> 07/21/2003 <b>RULE</b>	<b>CLASS</b> 501	<b>GROUP ART UNIT</b> 1755	<b>ATTORNEY DOCKET NO.</b> 3691-573
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## APPLICANTS

Scott V. Thomsen, Milford, MI;  
 Richard Hulme, Rochester Hills, MI;  
 Leonid Landa, Grosse Ile, MI;  
 Ksenia A. Landa, Grosse Ile, MI;

\*\* CONTINUING DATA \*\*\*\*\*

*See CAP*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

*See CAP*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 11/25/2003

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	<b>STATE OR COUNTRY</b> MI	<b>SHEETS DRAWING</b> 0	<b>TOTAL CLAIMS</b> 31	<b>INDEPENDENT CLAIMS</b> 3
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged <i>[Signature]</i> Examiner's Signature	<i>[Initials]</i> Initials			

## ADDRESS

23117

## TITLE

Grey glass composition

<b>FILING FEE RECEIVED</b> 1098	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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